Effective on 12/08/2004.					Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL					Application Number   10/517,			-		
					Filing Date 6/13/20					
For FY 2008					First Named Inventor H.J.T. Coelingh Bennink			nink et al.		
Applicant claims small entity status. See 37 CFR 1.27					Examiner Name Sam		nmira Jean-Louis			
					Art Unit 1617					
TOTAL AMOUNT OF PAYMENT         (\$) 1,050.00         Attorney Docket         0470 - 045922										
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order Other (please identify):										
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayments of fee(s)										
under 37 CFR 1.16 and 1.17										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
	FILING FEES SEARC									
Application Type	Small Entity  Application Type Fee (\$) Fee (\$)		Small Entity Fee (\$) Fee (\$)		Fee (\$)	Small Entity Fee (\$)		Faac D	aid (\$)	
Utility	310	75	510	255	210	105		rees i	aid (3)	
Design	210	105	100	50	130	65				
Plant	210	105	310	155	160	80				
Reissue	310	155	510	255	620				<del></del>	
Provisional	210	105	0	0	0	310 0				
		103	U	U	V	U			Const. English	
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)										
Each claim over 20 (including Reissues) 50									25	
									105	
Multiple dependent claims 370 185										
- Total Claims	<u>- 20 or HP</u>	Extra Clair	ms <u>Fee</u>	<u>(\$)</u>	Fee Paid (\$)		<u>M</u>		ependent Claims	
HP = highest number	of total claims pai	d for, if greater th	an 20.					Fee (\$)	Fee Paid (\$)	
Indep. Claims	<u>- 3 or HP</u>	Extra Clair	ms <u>Fe</u>	<u>e (\$)</u>	Fee Paid (\$)		***********		-	
HP = highest number	of independent cla	nims paid for, if g								
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)										
/ 50 = (round up to a whole number) x =										
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): Three Month Petition For Extension of Time 1,050.00										
SUBMITTED BY										
Signature  Registration No.  (Astroprice/Agent)  Registration No.  (Astroprice/Agent)  Registration No.  (Astroprice/Agent)										
Name (Print/Type) William H. Logsdon Date September 26, 2008										
	<del>/</del>		***************************************					1		